								- 7	15					
PATENT APPLICATION FEE DETERMINATION RECO									Application or Docket Number					
	* PAIENT													
Effective October 1, 2003									10708482.					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	•	THAN ENTITY		
TOTAL CLAIMS			18					RATE	FEE	7	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE			
TOTAL CHARGEABLE CLAIMS			// minus 20=		•			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			4/ minus 3 =					X43=		OR	X86=	96		
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column :						olumn 2		TOTAL		OR		13/110		
CLAIMS AS AMENDED - PART II COlumn 1) (Column 2) (Column 3) CLAIMS HIGHEST								OTHER THAN						
<u>Z.</u>	34-02	(Column 1)	1	(Colum		(Column 3)		SMAL	LENTITY	OR	SMALL	ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	`	RATE	ADDI- TIONAL FEE		
	Total		Migus			-		X\$ 9=		OR	X\$18=			
	Independent	30	Minas	***	U	• _		X43=		OR	You			
	FIRST PRESE	NTATION OF MI	JUTIPLE DE	PENDENT	CLAIM			. 4 4 5						
								+145=		OR	+290= YOYAL	-		
	•	(Calcons 4)		<i>(</i>	- C'	10-1	. 4	ADDIT. FE		JOR	ADDIT. FEE			
	1	(Column 1) CLAIMS		(Colum			ir		1 400:	7 1		4000		
AMENDMENT B	2/17/06	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	RRESENT. EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	• (0	Minus	 20		2		X\$ 9=		OR	X\$18=			
	Independent	• &	Minus	300 Y		•	V	X43=		OR	X86=	2		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=			
						•	Ĺ	TOTAL			TOTAL			
		(Column 1)		(Colum	ያ. <mark>2</mark> ን - ((Column 3)	. #	VOOIT. FEE	·	J • • • •	NOOIT. FEEL			
SEN	\	CLAIMS	•	HIGHE	ST		-		ADDI-			ADDI-		
		REMAINING AFTER AMENDMENT		PREVIOU PAID FI	JSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL		
	Total	•	Minus	64		8		X\$ 9=		OR	X\$18=			
	Independent		Minus	trada		•		X43=	·		X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	740-		OR	~~~			
• 4	the entry is set -	na 4 la face their st		Ab.	00 L			+145=		OR	+290=			
H	the Highest Nur	nn 1 is less than the nber Previously Pai	d For IN THIS	S SPACE b	less than	20, enter *20.*	A	TOTAL DOIT. FEE		OR	TOTAL ODIT. FEE			
		tiber Previously Paid ber Previously Paid												